

# 10th Annual New England Youth Lacrosse All-star Tournament

## Boys Registration Form

<u>Qty</u>	<u>Division</u>		<u>FEE PAID</u>
—	11U	Please circle one      C-Competitive / B-More Competitive / A-Most Competitive Coach/Contact Name _____ Address _____ Home Phone # _____ Work Phone # _____ FAX # _____ Email _____	_____
—	13U	Please circle one      C-Competitive / B-More Competitive / A-Most Competitive Coach/Contact Name _____ Address _____ Home Phone # _____ Work Phone # _____ FAX # _____ Email _____	_____
—	15U	<b>(NOTE: No High School Players allowed in this Bracket !!!!!)</b> Please circle one      C-Competitive / B-More Competitive / A-Most Competitive Coach/Contact Name _____ Address _____ Home Phone # _____ Work Phone # _____ FAX # _____ Email _____	_____
—	16U	Please circle one      C-Competitive / B-More Competitive / A-Most Competitive Coach/Contact Name _____ Address _____ Home Phone # _____ Work Phone # _____ FAX # _____ Email _____	_____

**Notes:**

- 1) Please make checks payable to “**New England Youth Lacrosse All-star Tournament**”, Mail To: Garry Keane, 1 Mayhew Dr., Amherst, NH 03031,
- 2) Fees: \$900/Team if Paid in full after 5/15/08. Deposit of \$250/Team will hold slots until 6/15/08 and non-refundable after 6/15/08.
- 3) KEY DUE DATES:

Registration by:	to accompany payments/deposit*
Coaches Certifications by:	1 June 2008**
Fees Paid in full:	30 June 2008 ***
Team Rosters by:	30 June 2008

\*= Registrations received without a Point of Contact for each team being identified will be returned and not accepted until a person is identified and the contact information supplied.

\*\* = Certifications received after 6/1/08 will not be guaranteed T-Shirt sizes for their players.

\*\*\*= Any Team that has not paid in full by 6/30/08 will A) not be guaranteed a slot in the tournament, B) will not be scheduled for games and C) will not receive a schedule until full payment is received.